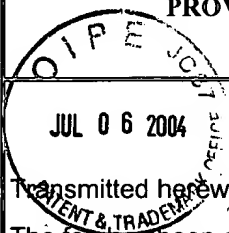

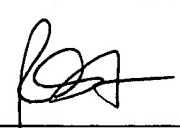


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|--|---|-------------------------------------|--|---------------------------------|---------------------------------|
| AMENDMENT TRANSMITTAL LETTER (Large Entity) | | | | Docket No. 112857-283 | |
| Applicant(s): Satoru Matsuda | | | | | |
| Application No. 09/923,624 | Filing Date 08/07/2001 | Examiner Ba Huynh | Customer No. 29175 | Group Art Unit 2173 | Confirmation No. 2083 |
| Invention: INFORMATION PROCESSING APPARATUS, INFORMATION PROCESSING METHOD, SERVICE PROVIDING SYSTEM, AND COMPUTER PROGRAM THEREOF | | | | | |
|  | | | COMMISSIONER FOR PATENTS: | | |
| | | | RECEIVED JUL 13 2004 Technology Center 2100 | | |
| Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 11 - | 11 = | 0 x | \$18.00 | \$0.00 |
| INDEP. CLAIMS | 4 - | 4 = | 0 x | \$86.00 | \$0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 |
| <div><input checked="" type="checkbox"/> No additional fee is required for amendment.</div> <div><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</div> <div><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</div> <div><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-1818</div> <div><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</div> <div><input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div> | | | | | |
| <div> _____ Signature</div> | | | Dated: June 30, 2004 | | |
| Jeffrey H. Canfield Reg. No. 38,404 Bell, Boyd & Lloyd LLC P.O. Box 1135 Chicago, Illinois 60690-1135 Telephone: (312) 807-4233 | | | <div>I certify that this document and fee is being deposited on 6/30/04 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div> <div> _____ Signature of Person Mailing Correspondence</div> <div>Renee Street _____ Typed or Printed Name of Person Mailing Correspondence</div> | | |
| CC: | | | | | |